Exhibit 2 Part 3 of 3

Case 1:03-md-01570-GBD-SN Document 276-6 Filed 06/30/04 Page 2 of 11 SCHEDULE

HIME BENEVOLENCE INTERNATIONAL FOUNDATION	EIN;	36-382	3186
ADDRESS P.O. Box 548	Calendar Ye		
WORTH, IL 60482	fiscal Year a	inded 4-3	30-94
FORM 990 - SCHEDULE "A"			
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sportment of the Treesury ternal Revenue Service	Under Section 501(c)(3) of the in	Part carefully,
the required informations), the application may	A User Fee must be attached to on and appropriate documents are not submitted alon y be returned to you,	Child copile a lois. This come 218 (citing symmetric proportion is a
Part I 🔻 Identifica	ation of Applicant	No. of the second secon
	nization (as shown in organizing document)	2 Employer Identification number (if nene, see instructions.) Applied For
1b c/o Name (if appli	cable)	Name and telephone number of person to be contacted if additional information is needed
1c Address (number,	street, and room or suite no.)	(\$4.50) (d. 10) \$430.00 (\$450) \$400.00 (\$40) \$20,000.00
1d City or town, state	and ZIP code	Month the annual accounting period and a second sec
5 Date incorporated	or formed 6 Activity codes (See Instructions.)	Check here if applying under section:
B Did the organization of the Cod	ion previously apply for recognition of examption und	he are time a series of the se
	form numbers, years filed, and internal Revenue offk	
THE RESERVE AND THE	have been required as of ye	EDVANIUME FINANCE
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No returns 10 Check the box for THE APPLICATIO a Corporation—	ryour type of organization. BE SURE TO ATTACH A CON BEFORE MAILING. Attach a copy of your Articles of Incorporation, (include a copy of your Articles and Incorporation) and the composite State of include a copy of your Articles and Incorporation.	WITH REMITTANCE JUNIST & 1992 E.C. Determination Unit MPLETE COPY OF THE CORRESPONDING DOCUMENTS TO uding amendments and restatements) showing approval by your bylaws.
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Partell Activities and Operational Information

Provide a detailed narrative description of all the activities of the organization—past, present, and planned, be not merely refer to er repeat the language in your organizational document. Describe each activity separately in the order of importance. Each all description should include, as a minimum, the following: (a) a detailed description of the activity including its purpose; (b) when the activity was or will be initiated; and (c) where and by whom the activity will be conducted.

Operations have not yet begun applied to the organization of the organization of the activity of the organization of the activity including its purpose; (b) when the activity was or will be initiated; and (c) where and by whom the activity will be conducted.

Benevolence international foundation his been organized to provide money and services to those who are in need, whe counder of the organization intend to provide support for educational and medical institution. That service the need, The organization intends to the money to those organizations that are truly in need of unding, initially, the director will ask religious organizations to suggest possible dones. The founder will ask religious organizations to suggest possible dones. The founder that they will each contributes \$5,000 to the organization has the necessary means to the organization of the organization has the necessary means to the organization of the organization has the necessary means to the organization or the organization has the necessary means to the organization or the organization or the organization or the organization has the necessary means to the organization or that the organization has the necessary means to attra None of the directors shall receive compensation for their se minimal amount of operating expenses (194 office supplies, p telephone, professional fees, atc.) are expected to be included yould like to begin operations approximately the same time. In operations in canada begin:

The Foundation is currently applying for limits its in Canada Farouq Malal, LLB at 38 Sweetland Avenue in Octova Canada is hand of the legal work necessary for the foundation to operate in Canada is naided.

The founders of the organization live abroad but graves to the united States on a regular basis of their absence of the Soliman of Khudeira, resident of Burbank, Illinois Shandles all matters

JUNU L & 1992

EO. Determination Unit

THE RESERVE TO

AND THE PARTY OF T What are or will be the organization's sources of financial support? List in order of size,

sinancia supports vival be 4 one the members and The organization's sources from friends as well as from fund raising

Describe the organization's fundraising program, both actual and planned, and explain to what extent it has been put into affect include details of fundraising activities such as selective mailings, formation of fundraising committees, use of volunteers of professional fundraisers, etc. Attach representative copies of solicitations for financial sur

intenda to have sund struct by with the marketing methods

	Give the following information about the organization's governing body: Names, addresses, and titles of officers, directors, trustees, etc.	16 Annual Compensation
Ad He Je	el Abdul Jalil Batterjee 3. Mazin M.S. Bahareth lmi Kutbi 3000 (Arabia 2000) Abdul Rahman Alsideri ddah Saudi Arabia 2000 (Arabia ahir Abdulraoof Batterjee	CIONS
El	Seqafh Medical percy bia day at 1813 day addah Saudi Arabia	
	Do any of the above persons serve as members of the governing body by reason of being public efficients. 19 "Yes," name those persons and explain the basis of their selection or appointment.	
in the	Are any members of the organization's governing body "disqualified persons" with respect to the organization of the organizati	
d el	Are any members of the organization agreed the governing body) or do any of the members have eith (other than by reason of being a member of the governing body) or do any of the members have eith business or family relations. Jp with "disqualified persons"? (See the specific instructions for the 4d business or family relations. Jp with "disqualified persons"? (See the specific instructions for the 4d business or family relations.)	TO TEND
	The state of the s	a pyfe i 2ko
G	Does the organization control or is it controlled by any other organization? is the organization the outgrowth of (or successor to) another organization, or does it have a special with another organization by reason of interlocking directorates or other factors? If either of these questions is answered "Yes," explain.	the state of the s
	encial son equitable dels dels dels dels dels dels dels de	
•	Does or will the organization directly or indirectly engage in any of the following transactions with a organization or other exempt organization (other than 501(c)(3) organizations): (a) grants; (b) pursuates of assets; (c) rental of facilities or equipment; (d) loans or loan guarantees; (e) reimbursame arrangements; (f) performance of services, memberahip, or fundraising solicitations; or (g) sharing	
	equipment, mailing lists or other assets, or paid employees? If "Yes," explain fully and identify the other organizations involved.	THE WAY

Form 1023 (Nov. 9-90)		Mini maaaaaaaa	e Les ables bell al-Ja (; il l'applice), de	admin standillaridi mora i tanggingi	Page 4
Part II Activities and Ope	rational information (C	onlinued)			
What assets does the organize investment income.) If any as when such final steps will be to the company of the	ation have that are used in t sets are not fully operations aken. If "None," indicate "I	he performance of f el, explain their statu V/A	s exempt function? s, what additional si	Do not include pro eps semain to be c	perty producing ompleted, and
	P. N/A WARREN		manife to almost account on an	and the second second	
9a Will any of the organization's contractual agreement? b is the organization a party to a life either of these questions	ny leasas?		4	4	
s between the applicant and the	other parties	CON CITATION CONT	iner also extensi ti		
		in the second se		مرادي وروسان ما المادي والمادي	
10 is the organization a members if "Yes," complete the following a Describe the organization's mo		43.4		rice of the second	i Yas a □ Ha Basa
The only membership are no set fees or d	requirement is th	at the indiv	out he of or	od reputati	on. There + ccepted.
b Describe your present and pro- or promotional material used in	posed efforts to attract men or this purpose. PI ABBO	nbers, and altach a	epy of any description		
			'u	o o	
Must benefits do (or will) your members will not rec they will be doing a and can fool better	eive any monetary cts of good deeds	benefitation	mitheir payme belbettering	nte of ones the lives o	Rather
In If the organization provides ber	ells, services or products,	are the recipients re	quired, or will they b	Contract Contract	Yor ≠ □ No
If "Yes," explain how the charg	ottomineo, indet	CIT CON OI YOU G	it in the circuit		
b Does or will the organization its	nit its benefits, services or	products or position			
of individuals? If "Yes," explain how the recipion of the second of the				⊠N/A □	Yes □ No
一种性,心则			ور ورود آراد المعارض و المعارض	and the second s	
2 Does or will the organization att Il "Yes," explain. Also, give an or or plans to devote to this activity	estimate of the percentage	of the organization	Ume and lunds wh	ich it devoles	Yee' [] No
Does or will the organization int	ervene in any way in politic	al campaigns, includ	ing the publication o	distribution	
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Technical Requirements			:
Are you filing Form 1023 within 15 months from If you answer "Yes," do not answer questions 2 t	the end of the month in which you were c through 6.	orleder(come)) (Wich C	
If one of the exceptions to the 15-month filing requestion 7. Exceptions—You are not required to file an exe	The state of the s		
(a) is a church, interchurch organization, loc auxiliary of a church; (b) Is not a private foundation and normally	cal unit of a church, a convention or associ has gross receipts of not more than \$5,00	None churches, or an integrated	
(c) is a subordinate organization covered by submitted a notice covering the subordin	a group examption letter, but only if the party.	rent or supervisory or anization time	
If you do not meet any of the exceptions in quest sequirement?	ation 2, do you wish to request reliet from	Coloradii de C	Ho 2 and
If you answer "Yes" to question 3, please give yo in which your organization was created or former	our reasons for not filling this application wi d. (See the Instructions before complet)	thin 15 months from the end of the m	onth 1
10000			
When him			
Service and American			
(Mark Harry)			
A Marine			
Linear of a	2 · · · · · · · · · · · · · · · · · · ·		
If you answer "No" to both questions 1 and 3 qualification as a section 501(c)(3) organization with your key District Director. Therefore, do recognition of exemption as a section 501(c)(3) retroactively to the date you were formed?.	i and do not meet any of the exceptions ocan be recognized only from the date th over want us to consider your applicati	on as a request for the same of the same o	bi J J No. Š
retroactively to the date you were formed.			

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The Organization is private foundation? Is the organization a private foundation? If you answer "rea" to question 7, do you claim to be a private operating foundation? If you answer "rea" to question 7, do you claim to be a private operating foundation? If you answer "rea" to question 7, do you claim to be a private operating foundation? If you answer "rea" to question 7, and cate the public charity classification you are requesting by chicking the box below that most appropriately applies: THE ORGANIZATION IS NOT A PRIVATE FOUNDATION BECAUSE IT QUALIFIES. If you answer "No" to question 7, indicate the public charity classification you are requesting by chicking the box below that most appropriately applies: THE ORGANIZATION IS NOT A PRIVATE FOUNDATION BECAUSE IT QUALIFIES. As a church of a commeltion or association of churches (CHURCHES MUST COMPLETE SCHEDULE A). Find 1700(X1)(A)(II) As a school (MUST COMPLETE SCHEDULE B). Sections 509(a)(1) If you are a possible of a cooperative hospital service organization, or a If you are a possible or a cooperative hospital service organization of private organization operated in coopination with a hospital If you are a possible or a cooperative hospital service organization of your and 1700(X1)(A)(II) If you are a possible or a cooperative hospital service organization with a hospital If you are a possible organization operated in coopination with a hospital If you are a possible organization of your and 1700(X1)(A)(III) If you are a possible organization of your are requested your area of the support from contributions from	Ferm 1023 (Rev. 9-90)	feet.
Yes (Answer question 8.0) No.	Part III Technical Requirements (Continued)	
Yee Complete Schedule E No No No No No No No	Yes (Answer question 8.) Ne (Answer question 9 and proceed as instructed.)	
appropriately applies: THE ORGANIZATION IS NOT A PRIVATE FOUNDATION BECAUSE IT QUALIFIES (a) As a church or a convention or association of churches (CHURCHES MUST COMPLETE SCHEDULE A). (b) As a school (MUST COMPLETE SCHEDULE B). (c) As a hospital or a cooperative hospital service organization, or a sections 509(a)(1) and 170(b)(1)(A)(i) (d) As a hospital or a cooperative hospital service organization, or a sections 509(a)(1) and 170(b)(1)(A)(ii) (d) As a gyvernmental unit described in section 170(c)(1). (d) As a gyvernmental unit described in section 170(c)(1). (d) As a gyvernmental unit described in section 170(c)(1). (d) As being operated solely for the benefit of, or in connection with, one or more of the organizations described in (a) through (d), (a), (h), or (i) (MUST COMPLETE SCHEDULE D). (g) As being operated for the benefit of a college or university that is sections 509(a)(3) (g) As being operated for the benefit of a college or university that is sections 509(a)(1) and 170(b)(1)(A)(b) (g) As being operated for the benefit of a college or university that is sections 509(a)(1) and 170(b)(1)(A)(b) (g) As receiving a substantial part of its support in the form of contributions from publicly supported organizations, from a sections 509(a)(1) and 170(b)(1)(A)(b) (g) As normally receiving not more than one-third of its support from gross investment income and more than one-third of its support from gross investment income and more than one-third of its support from contributions, membership fees, and gross receipts from activities or contributions, membership fees, and gross receipts from activities or contributions, membership fees, and gross receipts from activities or contributions, membership fees, and gross receipts from activities or contributions, membership fees, and gross receipts from activities or related to its exempt functions (subject to certain exceptions). (g) We are a publicly supported organization but are not sure whether we good the sections of the contributions of the co	☐ Yee (Complete Schedule E) ☐ No After answering this question, go to Part IV.	
(a) As a church or a commention or association of churches (CHURCHES MUST COMPLETE SCHEDULE A). (b) As a school (MUST COMPLETE SCHEDULE B). (c) As a hospital or a cooperative hospital service organization, or a sections 509(a)(1). (d) As a hospital or a cooperative hospital service organization, or a sections 509(a)(1). (MUST COMPLETE SCHEDULE C). (d) As a governmental unit described in section 170(c)(1). (e) As a governmental unit described in section 170(c)(1). (f) As a governmental unit described in section 170(c)(1). (g) As being operated solely for the benefit of, or in connection with, one or more of the organizations described in (a) through (d), (g), (h), or (f). (g) As being operated and operated exclusively for testing for public safety. (g) As being operated for the benefit of a college or university that is section 509(a)(1). (g) As receiving a substantial part of its support in the form of contributions from publicly supported organizations, from a section 509(a)(1). (g) As normally receiving not more than one-third of its support from gross investment income and more than one-third of its support from contributions, membership fees, and gross receipts from achities. Felsted to its exempt functions (subject to certain exceptions). (g) As normally receiving not more than one-third of its support from contributions, membership fees, and gross receipts from achities. Felsted to its exempt functions (subject to certain exceptions). (g) We are a publicly supported organization but are not sure whether we meet the public support test of block (h) or block (f). We would like the	appropriately applies:	
(b) As a school (MUST COMPLETE SCHEDULE B). (c) As a hospital or a cooperative hospital service organization, or a service organization operated in conjunction with a hospital and 170(bX1)(A)(ii) and 170(bX1)(A)(iii) (MUST COMPLETE SCHEDULE C). (d) As a governmental unit described in section 170(cX1). (a) As being operated solely for the benefit of, or in connection with, one or more of the organizations described in (a) through (d), (g), (h), or (i) (MUST COMPLETE SCHEDULE D). (f) As being operated and operated exclusively for testing for public safety. (g) As being operated for the benefit of a college or university that is section 509(a)(1) and 170(b)(1)(A)(b) (h), or (ii) and 170(b)(1)(A)(b) (h), or (iii) and 170(b)(1)(A)(b) (h),		Sections 509(a)(1)
(c) As a hospital or a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital and 170(b)(1)(A)(iii) (MUST COMPLETE SCHEDULE C). (d) As a governmental unit described in section 170(c)(1). (e) As a governmental unit described in section 170(c)(1). (f) As a governmental unit described in section 170(c)(1). (g) As being operated solely for the benefit of, or in connection with, one or more of the organizations described in (a) through (d), (g), (h), or (f). (g) As being organized and operated exclusively for testing for public safety. (g) As being operated for the benefit of a college or university that is section 509(a)(1). (g) As period or operated by a governmental unit. (h) As receiving a substantial part of its support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public, (g) As normally receiving not more than one-third of its support from gross investment income and more than one-third of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions). (f) We are a publicly supported organization but are not sure whether we meet the public support test of block (h) or block (f). We would like the	(b) As a school (MUST COMPLETE SCHEDULE B).	
Gold As a governmental unit described in section 170(c)(1). Sections 509(s)(1) Sections 509(s)(1) Sections 509(s)(1) Sections 509(s)(1) Sections 509(s)(3) Sectio	medical research organization operated in conjunction with a hospital	
(a)		Sections 509(a)(1)
safety. (g)	(a) As being operated solely for the benefit of, or in connection with, one or more of the organizations described in (a) through (d), (g), (h), or (i)	(Section B09(a)(3)
owned or operated by a governmental unit. (h)		Section 509(a)(4)
(h) As receiving a substantial part of its support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public. (i) As normally receiving not more than one-third of its support from gross investment income and more than one-third of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions). (j) We are a publicly supported organization but are not sure whether we meet the public support test of block (f), we would like the		
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(f) We are a publicly supported organization but are not sure whether we meet the public support test of block (h) or block (f). We would like the	gross investment income and more than one-third of its support from contributions, membership fees, and gross receipts from activities	√8ection 509(e)(2)
nutering usasure on tarte in nature in hober cressing should a section of a section	(f) We are a publicly supported organization but are not sure whether we	and 170(b)(1)(A)(vi)

If you checked one of the boxes (a) through (f) in question 9, go to question 14.

If you checked box (g) in question 9, go to questions 11 and 12.

If you checked box (h), (i), or (i), go to question 10.

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8718

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User Fee for Exempt Organization

Determination Letter Request

► Attach this form to determination letter application.

(Form 8718 is NOT a determination letter application)

Form 0/10 USE (Rev. October 1990)	r Fee for Exemp etermination Let	t Organization Ster Request	on and a	trol number 54L	1248
Department of the Treasury Attach	this form to determina 8718 is NOT a determ	ation letter applic	ation.	vint pale	
1 Name of organization	nal Foundation				
2 Type of request (check only one box Service for the amount of the indicate	and include a check or m	noney order made pa	yable to internal Re	venue	Fee 15
a initial request for an exempt organization whose	annual gross receipts have	e not exceeded for a	re not expected to e	rceed) NGS	
\$10,000, averaged over the progress receipts averaging not mor complete the income certification	eceding four taxable years, than \$10,000 during the	or new organization r first four years. If y	is which anticipate ou check this box yo	annual Programme	\$ 150
	Certifica	tlon	ECEIVED		
	· 1947] · 1943 [基本版]		H REMITTANCE	A PARAMETER	alter State of the state of
I hereby certify that the annual gross exceeded (or are not expected to exce	•	(entername of organization	(or Medium Done) w	o not	
operation.	27v	CONTRACTOR AND	elermination Un	FILLULA - 35 / 3	
Signature ▶	Title	DI ASETT			/0. //
b IXI Initial request for an exempt orga- letter) by an organization whose averaged over the preceding four	annual gross receipts have :	exceeded (or are exp	ected to exceed) \$10	,000,	
averaging more than \$10,000 do	iring their first four years			caipts	\$ 375
c Private foundation which has corthat it is now a public charity.	npleted a section 507 term	ination and which se	eks a determination	letter	\$ 200
d Group exemption letters ,	5 : * * * * * * * * * * * * * * * * * *				\$ 500
Instructions	be sure that your applica applicable address show	ition is sent to the	Albuquerque, Austin, Cheyenne, Dallas,	Internal Revenue Ser EP/EO Division Mail Code 4950 DAL	vice
The Omnibus Budget Reconciliation Act of 1990 requires payment of a user fee for determination letter requests submitted to	In Publication 557 and a	Il application	Salt Lake City, Wichita	Dallas, TX 75242	
the Internal Revenue Service. The fee must accompany each request submitted to a key district office.	if entity is in 🔠 💥	send fee and request for determination	Atlanta, Birmingham, Columbia, Ft. Supplies Lauderdale, Greensboro,	P.O. Box 941	vice
The fee for each type of request for an exempt organization determination letter is	▼	letter to this address	Jackson, Jacksonville, Little Rock, Nashville, New Orleans	Barrier Branch	(27) (10) (2)
listed in item 2 of this form. Check the block that describes the type of request	Brooklyn, Buffalo, El Burlington, Hartford, P.	elemai Revenue Service P/EO Division . O. Box 1680, GPO rooklyn, NY 11202	Anchorage, Boise, Las Vegas, Los Angeles, Honolulu, Portland,	Internal Revenue Ser EO Application Recei Room 5127, P. O. Bo	ving I
you are submitting, and attach this form to the front of your request form along with a check or money order for the	Providence Baltimore, District of In	iternal Revenue Service	Laguna Niguel, San Jose, Seattle	Los Angeles, CA 900	53-0486
amount Indicated. Make the check or		P/EO Division O. Box 17010	Sacramento,	Internal Revenue Ser	vice
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Consent Fixing Period of Limitation Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code

(See Instructions on reverse side.)

Under section 6501(c)(4) of the internal Revenue Code, and as part of a request filed with Form 1023 that the organization named below be treated as a publicly supported organization under section 170(b)(1)(A)(vi) or section 509(a)(2) during an advance ruling period, 🕾

Benevolence International

c/o Soliman J. Khudaira 7810

Burbank IL 60459

District Director of 1 Internal Revenue, or Assistant Commissioner end ho (Employee Plans and Exempt Organizations)

Consent and agree that the period for assessing tax (imposed under section 4940 of the Code) for any of the 5 tax years in the advance ruling period will extend 8 years, 4 months, and 15 days beyond the end of the first tax year?

However, if a notice of deficiency in tax for any of these years is sent to the organization before the period expires, the time for making an assessment will be further extended by the number of days the assessment is prohibited, plus 60 and the contract of the code of the code

Ending date of first tax year ... December ... 3

The conversion

Name of organization (as shown in organizing document)

Benevolence International Foundation

Officer or trustee having authority to sign

Signature >

For IRS use only

District Director or Assi

For Paperwork Reduction Act Notice, see page 1 of the Form 1923 instructions

You must complete this form and attach it to you application if two checked hox (h), (l), or (l) of Part III, question 9, and you it we not completed a tax year of at least 8 months.

For example: If you incorporated May 15 and you ryear ends
December 31, you have completed a tax year of
only 7½ months. Therefore Form 872:0 milest
be completed.

- (a) Enter the name of the organization. This must be entered exactly a lit is written in the organizing document. Do not use abbreviations unless the organizing document does.
- (b) Enter the current address.
- Miles and a mile of the particular property of the
- (c) Enter ending date of first tax year.

OF ANY SECTION EXAMPLE:

- (a) If you were formed on June 15 and you have chosen December 31 as your year end, enter December 31 19 months (b) If you were formed June 15 and have chosen June 30 as your year end, enter June 30, 19 in this example your first tax year consists of only 15 days
- (d) The form must be signed by an authorized office for trustee generally the President or Treasurer.
- (e) Enter the date that the form was signed.

DO NOT MAKE ANY OTHER ENTRIES